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TYPE SMALL ENTITY **PUBLICATION FEE** ISSUE FEE TOTAL FEE(S) DUE DATE DUE NO: \$1330 \$300 \$1630 nonprovisional 02/05/2004 CLASS-SUBCLASS **EXAMINER** ART UNIT 349-065000 SCHECHTER, ANDREW'M 2871 Change of correspondence address or indication of "Fee Address" (37) 2. For printing on the patent front page, list (1) the CFR 1.363). names of up to 3 registered patent attorneys or Winston Hsu agents OR, alternatively, (2) the name of a single ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. 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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 09/779,463 Application Numb r TRANSMITTAL 02/09/2001 Filing Date **FORM** Chi-Yu Liao **First Named Inventor Group Art Unit** 2871 (to be used for all correspondence after initial filing) SCHECHTER, ANDREW M **Examiner Name** 3 **API084 Attorney Docket Number** Total Number of Pages in This Submission **ENCLOSURES** (check all that apply) After Allowance Communication Assignment Papers Fee Transmittal Form (for an Application) to Group Appeal Communication to Board Fee Attached Drawing(s) of Appeals and Interferences Licensing-related Papers Appeal Communication to Group Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition After Final **Proprietary Information** Petition to Convert to a Affidavits/declaration(s) **Provisional Application** Status Letter Power of Attorney, Revocation Change of Correspondence Other Enclosure(s) (please **Extension of Time Request** Address identify below): Terminal Disclaimer **Express Abandonment Request** Request for Refund Information Disclosure Statement CD, Number of CD(s) _____ Certified Copy of Priority Document(s) Remarks Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Winston Hsu, Reg. No.: 41,526 Individual name Ilistan Hous Signature Date **CERTIFICATE OF MAILING** I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: Typed or printed name Signature Date

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